

SOURCE OF INCOME STATEMENT

Disclosure for Tax Year Ending	x Year Ending Last Name Fir		t Name		Middle Name/Initial
Mailing Address – Street Number, Street Name, or P.O. Box					
City, State, Zip			ID Number		umber
If your home address is your mailing address, and your home address is exempt from public records pursuant to Fla. Stat. §119.07, read instructions on the following page and check here. \square					
Filing as an Employee (check one)					
County/Public Health Trust Municipal:					
Department					
Position or Title					
Work address			Work telephone		Employment began on/ended on
Filing as a Board Member (check one)					
County Board Municipal:					
Board where serving (Municipality)					
Alternate address (if home address is exempt)		Work telephone		Term began on/ended on	
List below every source of income you received, along with the address and the principal activity of each source. Include your public salary. Place the sources of income in descending order, with the largest source first. Also, include any source of income received by another person for your benefit. However, the income of your spouse or any business partner need not be disclosed. If continued on a separate sheet, check here.					
Name of Source of Inco	ome	Address		Description	of the Principal Business Activity
I hereby swear (or affirm) that the information above is a true and correct statement.				RECEIVED BY ELECTIONS DEPARTMENT: Hardcopy Electronic Copy	
Signature of Person Disclosing					
Date signed					

OFFICE USE ONLY Accepted: Y / N Deficiency:_138_SP-14 COE 2015

Processed Date/Initials:_

Scanned Date/Initials:

SOURCE OF INCOME INFORMATION

Required by the Miami-Dade County Code, Section 2-11.1(i)

The term INCOME shall include, but is not limited to, the following items: wages, salaries; tips; bonuses; commissions & fees; dividends, interest; profits from businesses and professions; your share of profits from partnerships and small business corporations; pensions, annuities & endowments; profits from the sale or exchange of real estate, securities or other property, including personal residence; rents and royalties; your share or estate or trust income, including accumulated distributions; alimony, separate maintenance or support payments; prizes, awards and gifts; fees as an Executor, Administrator or Director; disability retirement payments; workmen's compensation, insurance; damages; etc.

FILING INSTRUCTIONS

A "Source of Income Form," or a copy of the personal income tax forms may be filed to satisfy the filing requirement for County/Public Health Trust employees, municipal employees, and advisory board members not required to file under State law.

This form must be filed by July 1st of each year.

This form should not be used as a substitute for State Form 1 for those required to file under state requirements.

Miami-Dade County (including Public Health Trust) Personnel and Advisory Board members shall file completed forms with:

Miami-Dade Elections Department Attn: Financial Disclosure Section 2700 NW 87th Avenue Miami, FL 33172

or

P.O. Box 521550 Miami, FL 33152-1550

or at

financial.disclosures@miamidade.gov

Municipal Personnel and **Advisory Board Members** shall file completed forms with their respective Municipal Clerk.

For further information, Miami-Dade County and Public Health Trust employees may contact the Miami-Dade Elections Department Financial Disclosure Section via telephone at **305-499-8413** or via email at financial.disclosures@miamidade.gov. Municipal employees may contact their respective Municipal Clerk's Office.

Note RE: Florida Statutes § 119.07: The role of our office is to receive and maintain forms filed as public records. If your home address is exempt from disclosure and you do not wish your home address to be made public, please use your office or other address for your mailing address. The following persons are exempt from disclosing their home addresses: active or former law enforcement personnel, including correctional and correctional probation officers, personnel of the Department of Children and Family Services whose duties include the investigation of abuse, neglect, exploitation, fraud, theft, or other criminal activities, personnel of the Department of Health whose duties are to support the investigation of child abuse or neglect, and personnel of the Department of Revenue or local governments whose responsibilities include revenue collection and enforcement or child support enforcement; firefighters; justices and judges; current or former state attorneys, assistant state attorneys, statewide prosecutors, or assistant statewide prosecutors; county and municipal code inspectors and code enforcement officers.